

19E
LSU HEALTH SCIENCES CENTER - HEALTH CARE SERVICES DIVISION
COMPARISON OF BUDGETED FISCAL YEAR 2001-2002
TO TOTAL RECOMMENDED FISCAL YEAR 2002-2003
(INCLUSIVE OF DOUBLE COUNTED EXPENDITURES)

Means of Financing & Table of Organization	As of 12-20-01		Total Recommended Over/(Under) E.O.B.
	Existing Operating Budget 2001-2002	Total Recommended 2002-2003	

LSU Health Sciences Center - Health Care Services Division

General Fund	\$3,550,000	\$3,494,000	(\$56,000)
Interagency Transfers	\$0	\$0	\$0
Fees and Self Gen.	\$0	\$0	\$0
Statutory Dedications	\$0	\$0	\$0
Interim Emergency Bd.	\$0	\$0	\$0
Federal	\$0	\$0	\$0
TOTAL	\$3,550,000	\$3,494,000	(\$56,000)
T. O.	0	0	0

610 - Health Care Services Division

> **EXECUTIVE ADMINISTRATION AND GENERAL SUPPORT :** Central staff arm of the Health Care Services Division, assisting the governing board and each Medical Center with information, technical assistance and administrative support. Each Medical Center is accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and Centers for Medicare and Medicaid Services (CMS) with the exception of W.O. Moss Regional Medical Center, which is only accredited by CMS.

General Fund	\$1,700,000	\$1,700,000	\$0
Interagency Transfers	\$0	\$0	\$0
Fees and Self Gen.	\$0	\$0	\$0
Statutory Dedications	\$0	\$0	\$0
Interim Emergency Bd.	\$0	\$0	\$0
Federal	\$0	\$0	\$0
TOTAL	\$1,700,000	\$1,700,000	\$0
T. O.	0	0	0

A supplementary recommendation of \$1,700,000 of which 100% is State General Fund, is included in the Total Recommended for this program. It represents 100% of the funding for the program and is contingent upon the renewal of the individual income tax limitation on excess itemized deductions.

OBJECTIVE: To target budgeted dollars for the provision of direct patient care, while ensuring efficient administrative costs by capping HCSD's administrative program at less than 3% of the total operating budget.

PERFORMANCE INDICATOR:

Administrative (central office) operating budget as a percent of the total HCSD total operating budget

1.26%	1.26%	0.00%
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LSU HEALTH SCIENCES CENTER - HEALTH CARE SERVICES DIVISION
COMPARISON OF BUDGETED FISCAL YEAR 2001-2002
TO TOTAL RECOMMENDED FISCAL YEAR 2002-2003
(INCLUSIVE OF DOUBLE COUNTED EXPENDITURES)

Means of Financing & Table of Organization	As of 12-20-01		
	Existing	Total	Total
	Operating	Recommended	Recommended
	Budget 2001-2002	2002-2003	Over/(Under) E.O.B.

> **E.A. CONWAY MEDICAL CENTER:** Acute care teaching hospital located in Monroe providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; house officer compensation and medical school supervision, and direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three-year) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

General Fund	\$120,474	\$120,474	\$0
Interagency Transfers	\$0	\$0	\$0
Fees and Self Gen.	\$0	\$0	\$0
Statutory Dedications	\$0	\$0	\$0
Interim Emergency Bd.	\$0	\$0	\$0
Federal	\$0	\$0	\$0
TOTAL	\$120,474	\$120,474	\$0
T. O.	0	0	0

A supplementary recommendation of \$120,474 of which 100% is State General Fund, is included in the Total Recommended for this program. It represents 100% of the funding for the program and is contingent upon the renewal of the individual income tax limitation on excess itemized deductions.

OBJECTIVE: To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services to patients in the hospital and maintain the average length of stay of 5.6 days for patients admitted into the hospital.

PERFORMANCE INDICATORS:

Average daily census
Emergency Department visits
Total outpatient encounters
FTE staff per patient (per adjusted discharge)
Cost per adjusted discharge
Readmission rate
Patient satisfaction survey rating

128	112	(16)
37,488	32,929	(4,559)
147,144	129,251	(17,893)
7.5	7.5	0.0
\$5,414	\$5,329	(\$85)
10.5%	10.5%	0%
85.0%	85%	0%

OBJECTIVE: To continue the system-wide development of and increased participation in the current disease management initiatives with the expectation of significant per patient cost avoidance attributed to prevention of complications associated with these conditions. To enroll at least one-third of the eligible diagnosed diabetic, asthmatic, HIV positive and high risk congestive heart failure patients in the Health Care Services Division (HCSD) system into disease management protocols.

PERFORMANCE INDICATORS:

ER visit rate for congestive heart failure patients
Hospitalization rate related to asthma patients
ER visit rate for asthma patients
Percentage of diabetic patients with long term glycemic control
Hospitalization rate related to HIV patients

Not applicable	400	Not applicable
Not applicable	400	Not applicable
Not applicable	200	Not applicable
Not applicable	40%	Not applicable
Not applicable	750	Not applicable

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LSU HEALTH SCIENCES CENTER - HEALTH CARE SERVICES DIVISION
COMPARISON OF BUDGETED FISCAL YEAR 2001-2002
TO TOTAL RECOMMENDED FISCAL YEAR 2002-2003
(INCLUSIVE OF DOUBLE COUNTED EXPENDITURES)

Means of Financing & Table of Organization	As of 12-20-01		Total Recommended Over/(Under) E.O.B.
	Existing Operating Budget 2001-2002	Total Recommended 2002-2003	

> **EARL K. LONG MEDICAL CENTER:** Acute care teaching hospital located in Baton Rouge providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; house officer compensation and medical school supervision, and direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three-year) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

General Fund	\$126,358	\$320,358	\$194,000
Interagency Transfers	\$0	\$0	\$0
Fees and Self Gen.	\$0	\$0	\$0
Statutory Dedications	\$0	\$0	\$0
Interim Emergency Bd.	\$0	\$0	\$0
Federal	\$0	\$0	\$0
TOTAL	\$126,358	\$320,358	\$194,000
T. O.	0	0	0

MAJOR CHANGES FROM EXISTING OPERATING BUDGET

Adjustment for vascular surgeon for dialysis (\$194,000 State General Fund)

A supplementary recommendation of \$320,358 of which 100% is State General Fund, is included in the Total Recommended for this program. It represents 100% of the funding for the program and is contingent upon the renewal of the individual income tax limitation on excess itemized deductions.

OBJECTIVE: To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services to patients in the hospital and maintain the average length of stay of 5.6 days for patients admitted into the hospital.

PERFORMANCE INDICATORS:

Average daily census
Emergency Department visits
Total outpatient encounters
FTE staff per patient (per adjusted discharge)
Cost per adjusted discharge
Readmission rate
Patient satisfaction survey rating

113	99	(14)
70,816	62,205	(8,611)
198,568	174,422	(24,146)
7.9	7.9	0.0
\$6,481	\$7,528	\$1,047
10.5%	10.5%	0%
85%	85%	0%

OBJECTIVE: To continue the system-wide development of and increased participation in the current disease management initiatives with the expectation of significant per patient cost avoidance attributed to prevention of complications associated with these conditions. To enroll at least one-third of the eligible diagnosed diabetic, asthmatic, HIV positive and high risk congestive heart failure patients in the Health Care Services Division (HCSD) system into disease management protocols.

PERFORMANCE INDICATORS:

ER visit rate for congestive heart failure patients
Hospitalization rate related to asthma patients
ER visit rate for asthma patients
Percentage of diabetic patients with long term glycemic control
Hospitalization rate related to HIV patients

Not applicable	400	Not applicable
Not applicable	400	Not applicable
Not applicable	200	Not applicable
Not applicable	40%	Not applicable
Not applicable	750	Not applicable

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TO TOTAL RECOMMENDED FISCAL YEAR 2002-2003
(INCLUSIVE OF DOUBLE COUNTED EXPENDITURES)

Means of Financing & Table of Organization	As of 12-20-01 Existing Operating Budget 2001-2002	Total Recommended 2002-2003	Total Recommended Over/(Under) E.O.B.
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> **HUEY P. LONG MEDICAL CENTER:** Acute care teaching hospital located in the Alexandria area providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; house officer compensation and medical school supervision, and direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three-year) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

General Fund	\$99,493	\$99,493	\$0
Interagency Transfers	\$0	\$0	\$0
Fees and Self Gen.	\$0	\$0	\$0
Statutory Dedications	\$0	\$0	\$0
Interim Emergency Bd.	\$0	\$0	\$0
Federal	\$0	\$0	\$0
TOTAL	\$99,493	\$99,493	\$0
T. O.	0	0	0

A supplementary recommendation of \$99,493 of which 100% is State General Fund, is included in the Total Recommended for this program. It represents 100% of the funding for the program and is contingent upon the renewal of the individual income tax limitation on excess itemized deductions.

OBJECTIVE: To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services to patients in the hospital and maintain the average length of stay of 5.6 days for patients admitted into the hospital.

PERFORMANCE INDICATORS:

Average daily census
Emergency Department visits
Total outpatient encounters
FTE staff per patient (per adjusted discharge)
Cost per adjusted discharge
Readmission rate
Patient satisfaction survey rating

51.4	45	(6.4)
56,533	49,676	(6,857)
115,413	101,379	(14,034)
6.4	6.4	0.0
\$5,114	\$6,017	\$903
10.5%	10.5%	0%
85%	85%	0%

OBJECTIVE: To continue the system-wide development of and increased participation in the current disease management initiatives with the expectation of significant per patient cost avoidance attributed to prevention of complications associated with these conditions. To enroll at least one-third of the eligible diagnosed diabetic, asthmatic, HIV positive and high risk congestive heart failure patients in the Health Care Services Division (HCSD) system into disease management protocols.

PERFORMANCE INDICATORS:

ER visit rate for congestive heart failure patients
Hospitalization rate related to asthma patients
ER visit rate for asthma patients
Percentage of diabetic patients with long term glycemic control
Hospitalization rate related to HIV patients

Not applicable	400	Not applicable
Not applicable	400	Not applicable
Not applicable	200	Not applicable
Not applicable	40%	Not applicable
Not applicable	750	Not applicable

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> **UNIVERSITY MEDICAL CENTER:** Acute care teaching hospital located in Lafayette providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; house officer compensation and medical school supervision, and direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three-year) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

General Fund	\$112,464	\$112,464	\$0
Interagency Transfers	\$0	\$0	\$0
Fees and Self Gen.	\$0	\$0	\$0
Statutory Dedications	\$0	\$0	\$0
Interim Emergency Bd.	\$0	\$0	\$0
Federal	\$0	\$0	\$0
TOTAL	\$112,464	\$112,464	\$0
T. O.	0	0	0

A supplementary recommendation of \$112,464 of which 100% is State General Fund, is included in the Total Recommended for this program. It represents 100% of the funding for the program and is contingent upon the renewal of the individual income tax limitation on excess itemized deductions.

OBJECTIVE: To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services to patients in the hospital and maintain the average length of stay of 5.6 days for patients admitted into the hospital.

PERFORMANCE INDICATORS:

Average daily census
Emergency Department visits
Total outpatient encounters
FTE staff per patient (per adjusted discharge)
Cost per adjusted discharge
Readmission rate
Patient satisfaction survey rating

91.4	80	(11.4)
44,887	39,429	(5,458)
175,909	154,518	(21,391)
12.8	12.8	0.0
\$5,749	\$7,151	\$1,402
10.5%	10.5%	0%
85%	85%	0%

OBJECTIVE: To continue the system-wide development of and increased participation in the current disease management initiatives with the expectation of significant per patient cost avoidance attributed to prevention of complications associated with these conditions. To enroll at least one-third of the eligible diagnosed diabetic, asthmatic, HIV positive and high risk congestive heart failure patients in the Health Care Services Division (HCSD) system into disease management protocols.

PERFORMANCE INDICATORS:

ER visit rate for congestive heart failure patients
Hospitalization rate related to asthma patients
ER visit rate for asthma patients
Percentage of diabetic patients with long term glycemic control
Hospitalization rate related to HIV patients

Not applicable	400	Not applicable
Not applicable	400	Not applicable
Not applicable	200	Not applicable
Not applicable	40%	Not applicable
Not applicable	750	Not applicable

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> **W.O. MOSS REGIONAL MEDICAL CENTER:** Acute care hospital located in Lake Charles providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; direct patient care physicians services; medical support (ancillary) services, and general support services. This facility is certified annually by the Centers for Medicare and Medicaid Services (CMS).

General Fund	\$107,996	\$107,996	\$0
Interagency Transfers	\$0	\$0	\$0
Fees and Self Gen.	\$0	\$0	\$0
Statutory Dedications	\$0	\$0	\$0
Interim Emergency Bd.	\$0	\$0	\$0
Federal	\$0	\$0	\$0
TOTAL	\$107,996	\$107,996	\$0
T. O.	0	0	0

A supplementary recommendation of \$107,996 of which 100% is State General Fund, is included in the Total Recommended for this program. It represents 100% of the funding for the program and is contingent upon the renewal of the individual income tax limitation on excess itemized deductions.

OBJECTIVE: To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services to patients in the hospital and maintain the average length of stay of 5.6 days for patients admitted into the hospital.

PERFORMANCE INDICATORS:

Average daily census
Emergency Department visits
Total outpatient encounters
FTE staff per patient (per adjusted discharge)
Cost per adjusted discharge
Readmission rate
Patient satisfaction survey rating

37	32	(5)
36,514	32,074	(4,440)
102,600	90,124	(12,476)
6.4	6.4	0.0
\$4,826	\$5,485	\$659
10.5%	10.5%	0%
85%	85%	0%

OBJECTIVE: To continue the system-wide development of and increased participation in the current disease management initiatives with the expectation of significant per patient cost avoidance attributed to prevention of complications associated with these conditions. To enroll at least one-third of the eligible diagnosed diabetic, asthmatic, HIV positive and high risk congestive heart failure patients in the Health Care Services Division (HCSD) system into disease management protocols.

PERFORMANCE INDICATORS:

ER visit rate for congestive heart failure patients
Hospitalization rate related to asthma patients
ER visit rate for asthma patients
Percentage of diabetic patients with long term glycemic control
Hospitalization rate related to HIV patients

Not applicable	400	Not applicable
Not applicable	400	Not applicable
Not applicable	200	Not applicable
Not applicable	40%	Not applicable
Not applicable	750	Not applicable

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TO TOTAL RECOMMENDED FISCAL YEAR 2002-2003
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Means of Financing & Table of Organization	As of 12-20-01 Existing Operating Budget 2001-2002	Total Recommended 2002-2003	Total Recommended Over/(Under) E.O.B.
--------------------------------------------------------	----------------------------------------------------------------	-----------------------------------	------------------------------------------------

> **LALLIE KEMP REGIONAL MEDICAL CENTER:** Acute care hospital located in Independence providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three-year) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

General Fund	\$103,191	\$103,191	\$0
Interagency Transfers	\$0	\$0	\$0
Fees and Self Gen.	\$0	\$0	\$0
Statutory Dedications	\$0	\$0	\$0
Interim Emergency Bd.	\$0	\$0	\$0
Federal	\$0	\$0	\$0
TOTAL	\$103,191	\$103,191	\$0
T. O.	0	0	0

A supplementary recommendation of \$103,191 of which 100% is State General Fund, is included in the Total Recommended for this program. It represents 100% of the funding for the program and is contingent upon the renewal of the individual income tax limitation on excess itemized deductions.

OBJECTIVE: To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services to patients in the hospital and maintain the average length of stay of 5.6 days for patients admitted into the hospital.

PERFORMANCE INDICATORS:

Average daily census
Emergency Department visits
Total outpatient encounters
FTE staff per patient (per adjusted discharge)
Cost per adjusted discharge
Readmission rate
Patient satisfaction survey rating

27	24	(3)
32,653	28,682	(3,971)
118,451	104,047	(14,404)
8.0	8.0	0.0
\$5,493	\$6,179	\$686
10.5%	10.5%	0%
85%	85%	0%

OBJECTIVE: To continue the system-wide development of and increased participation in the current disease management initiatives with the expectation of significant per patient cost avoidance attributed to prevention of complications associated with these conditions. To enroll at least one-third of the eligible diagnosed diabetic, asthmatic, HIV positive and high risk congestive heart failure patients in the Health Care Services Division (HCSD) system into disease management protocols.

PERFORMANCE INDICATORS:

ER visit rate for congestive heart failure patients
Hospitalization rate related to asthma patients
ER visit rate for asthma patients
Percentage of diabetic patients with long term glycemic control
Hospitalization rate related to HIV patients

Not applicable	400	Not applicable
Not applicable	400	Not applicable
Not applicable	200	Not applicable
Not applicable	40%	Not applicable
Not applicable	750	Not applicable

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COMPARISON OF BUDGETED FISCAL YEAR 2001-2002
TO TOTAL RECOMMENDED FISCAL YEAR 2002-2003
(INCLUSIVE OF DOUBLE COUNTED EXPENDITURES)

Means of Financing & Table of Organization	As of 12-20-01 Existing Operating Budget 2001-2002	Total Recommended 2002-2003	Total Recommended Over/(Under) E.O.B.
--------------------------------------------------------	----------------------------------------------------------------	-----------------------------------	------------------------------------------------

> **WASHINGTON-ST. TAMMANY REGIONAL MEDICAL CENTER:** Acute care hospital located in Bogalusa providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three-year) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

General Fund	\$88,025	\$88,025	\$0
Interagency Transfers	\$0	\$0	\$0
Fees and Self Gen.	\$0	\$0	\$0
Statutory Dedications	\$0	\$0	\$0
Interim Emergency Bd.	\$0	\$0	\$0
Federal	\$0	\$0	\$0
TOTAL	\$88,025	\$88,025	\$0
T. O.	0	0	0

A supplementary recommendation of \$88,025 of which 100% is State General Fund, is included in the Total Recommended for this program. It represents 100% of the funding for the program and is contingent upon the renewal of the individual income tax limitation on excess itemized deductions.

OBJECTIVE: To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services to patients in the hospital and maintain the average length of stay of 5.6 days for patients admitted into the hospital.

PERFORMANCE INDICATORS:

Average daily census
Emergency Department visits
Total outpatient encounters
FTE staff per patient (per adjusted discharge)
Cost per adjusted discharge
Readmission rate
Patient satisfaction survey rating

23	20	(3)
20,915	19,808	(1,107)
52,820	46,397	(6,423)
7.0	7.0	0.0
\$5,277	\$5,849	\$572
10.5%	10.5%	0%
85%	85%	0%

OBJECTIVE: To continue the system-wide development of and increased participation in the current disease management initiatives with the expectation of significant per patient cost avoidance attributed to prevention of complications associated with these conditions. To enroll at least one-third of the eligible diagnosed diabetic, asthmatic, HIV positive and high risk congestive heart failure patients in the Health Care Services Division (HCSD) system into disease management protocols.

PERFORMANCE INDICATORS:

ER visit rate for congestive heart failure patients
Hospitalization rate related to asthma patients
ER visit rate for asthma patients
Percentage of diabetic patients with long term glycemic control
Hospitalization rate related to HIV patients

Not applicable	400	Not applicable
Not applicable	400	Not applicable
Not applicable	200	Not applicable
Not applicable	40%	Not applicable
Not applicable	750	Not applicable

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Means of Financing & Table of Organization	As of 12-20-01 Existing Operating Budget 2001-2002	Total Recommended 2002-2003	Total Recommended Over/(Under) E.O.B.
--------------------------------------------------------	----------------------------------------------------------------	-----------------------------------	------------------------------------------------

> **LEONARD J. CHABERT MEDICAL CENTER:** Acute care teaching hospital located in Houma providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; house officer compensation and medical school supervision, and direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three-year) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

General Fund	\$113,501	\$113,501	\$0
Interagency Transfers	\$0	\$0	\$0
Fees and Self Gen.	\$0	\$0	\$0
Statutory Dedications	\$0	\$0	\$0
Interim Emergency Bd.	\$0	\$0	\$0
Federal	\$0	\$0	\$0
TOTAL	\$113,501	\$113,501	\$0
T. O.	0	0	0

A supplementary recommendation of \$113,501 of which 100% is State General Fund, is included in the Total Recommended for this program. It represents 100% of the funding for the program and is contingent upon the renewal of the individual income tax limitation on excess itemized deductions.

OBJECTIVE: To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services to patients in the hospital and maintain the average length of stay of 5.6 days for patients admitted into the hospital.

PERFORMANCE INDICATORS:

Average daily census
Emergency Department visits
Total outpatient encounters
FTE staff per patient (per adjusted discharge)
Cost per adjusted discharge
Readmission rate
Patient satisfaction survey rating

78	68	(10)
50,218	44,111	(6,107)
173,611	152,500	(21,111)
8.0	8.0	0.0
\$5,593	\$6,391	\$798
10.5%	10.5%	0%
85%	85%	0%

OBJECTIVE: To continue the system-wide development of and increased participation in the current disease management initiatives with the expectation of significant per patient cost avoidance attributed to prevention of complications associated with these conditions. To enroll at least one-third of the eligible diagnosed diabetic, asthmatic, HIV positive and high risk congestive heart failure patients in the Health Care Services Division (HCSD) system into disease management protocols.

PERFORMANCE INDICATORS:

ER visit rate for congestive heart failure patients
Hospitalization rate related to asthma patients
ER visit rate for asthma patients
Percentage of diabetic patients with long term glycemic control
Hospitalization rate related to HIV patients

Not applicable	400	Not applicable
Not applicable	400	Not applicable
Not applicable	200	Not applicable
Not applicable	40%	Not applicable
Not applicable	750	Not applicable

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> **CHARITY HOSPITAL AND MEDICAL CENTER OF LOUISIANA AT NEW ORLEANS:** Acute care teaching hospital located in New Orleans providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; house officer compensation and medical school supervision, and direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three-year) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

General Fund	\$978,498	\$728,498	(\$250,000)
Interagency Transfers	\$0	\$0	\$0
Fees and Self Gen.	\$0	\$0	\$0
Statutory Dedications	\$0	\$0	\$0
Interim Emergency Bd.	\$0	\$0	\$0
Federal	\$0	\$0	\$0
TOTAL	\$978,498	\$728,498	(\$250,000)
T. O.	0	0	0

MAJOR CHANGES FROM EXISTING OPERATING BUDGET

Adjustment for non-recurring New Orleans Health Care Corporation. (-\$250,000 State General Fund)

A supplementary recommendation of \$728,498 of which 100% is State General Fund, is included in the Total Recommended for this program. It represents 100% of the funding for the program and is contingent upon the renewal of the individual income tax limitation on excess itemized deductions.

OBJECTIVE: To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services to patients in the hospital and maintain the average length of stay of 5.6 days for patients admitted into the hospital.

PERFORMANCE INDICATORS:

Average daily census
Emergency Department visits
Total outpatient encounters
FTE staff per patient (per adjusted discharge)
Cost per adjusted discharge
Readmission rate
Patient satisfaction survey rating

457	401	(56)
161,107	141,516	(19,591)
500,437	439,584	(60,853)
10.9	10.9	0.0
\$9,629	\$11,182	\$1,553
10.5%	10.5%	0%
85%	85%	0%

OBJECTIVE: To continue the system-wide development of and increased participation in the current disease management initiatives with the expectation of significant per patient cost avoidance attributed to prevention of complications associated with these conditions. To enroll at least one-third of the eligible diagnosed diabetic, asthmatic, HIV positive and high risk congestive heart failure patients in the Health Care Services Division (HCSD) system into disease management protocols.

PERFORMANCE INDICATORS:

ER visit rate for congestive heart failure patients
Hospitalization days related to asthma patients
ER visit rate for asthma patients
Percentage of diabetic patients with long term glycemic control
Hospitalization days related to HIV patients

Not applicable	400	Not applicable
Not applicable	400	Not applicable
Not applicable	200	Not applicable
Not applicable	40%	Not applicable
Not applicable	750	Not applicable

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COMPARISON OF BUDGETED FISCAL YEAR 2001-2002
TO TOTAL RECOMMENDED FISCAL YEAR 2002-2003
(INCLUSIVE OF DOUBLE COUNTED EXPENDITURES)

Means of	As of 12-20-01		
Financing	Existing		Total
&	Operating	Total	Recommended
Table of	Budget	Recommended	Over/(Under)
Organization	2001-2002	2002-2003	E.O.B.

TOTAL HEALTH CARE SERVICES DIVISION

General Fund	\$3,550,000	\$3,494,000	(\$56,000)
Interagency Transfers	\$0	\$0	\$0
Fees and Self Gen.	\$0	\$0	\$0
Statutory Dedications	\$0	\$0	\$0
Interim Emergency Bd.	\$0	\$0	\$0
Federal	\$0	\$0	\$0
TOTAL	\$3,550,000	\$3,494,000	(\$56,000)
T. O.	0	0	0